



CANISTER PLACEMENT FORM

Please submit this form immediately upon placing a Donation Canister in any new location.

DATE: _____

NAME OF CIRCLE: _____

REPORTING PERSON: _____

PHONE: _____

Canister No. (issued by KD office)	Location (business name) And full address/city/state/zip	Business Phone number	Business Website	Circle Member Servicing Canister (name)	Phone no. of Person Servicing

Submit completed form to:

The King's Daughters Office | 601 Children's Lane, 2nd floor | Norfolk, VA 23507 | Tel: 757.668.7098

Fax: 757.668.8907 | Email: info@kingsdaughters.org